

**ARIZONA SCHOOL FACILITIES BOARD  
LETTER OF INTENT / PURCHASE ORDER REQUEST FORM**

**Date:**

**Quote / Bid #:**

**Start Date:**

**Est. Comp. Date:**

**CONTRACTOR:**

**DISTRICT:**



*(Please Provide Complete Addresses, Including; Contact, Phone and Fax #'s)*

<b>ASFB Project #</b>	<b>Project Title / Description</b>	<b>Original Construction Budget (CCAP)</b>	<b>A/E Estimate Construction Cost</b>	<b>Base Bid (Including Taxes)</b>
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**For Additional Projects, Attach Detailed Backup**

CCAP: (For Partial Projects Include % of CCAP)	%	\$
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Total Base Bid: (Including all Applicable Taxes)	\$
--	----

Project Increase / Decrease: (Amount Over or Under CCAP)	\$
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District Funded Portion:	\$
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ASFB Funded Portion:	\$
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<b>TOTAL CONTRACT AMOUNT:</b>	<b>\$</b>
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**SCIP DEDUCT AMOUNT (From Bid Form)**      \$

***USE PAGE 2 FOR SUBMITTAL REVIEW COMMENTS***

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**USE ONE (1) EXPLANATION SHEET PER PROJECT NUMBER**

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**Title:**

*The \$ amounts are to reflect the difference between the original CCAP and Bid amount.*

**EXPLANATIONS (Please Be Specific):**

**Scope of Work Change:** \$

**Estimate Revision:** \$

**Energy Upgrades:** \$

**District Funding:** \$

**Project Management Firm:**

**PM Contact:**

**Phone:**

**Fax:**

**ASFB Project Supervisor:**

**Date:**

*Please Fax (602-542-6529) or Email this information to Kristi Gerken ([kgerken@sfb.state.az.us](mailto:kgerken@sfb.state.az.us)) or Charlie Hunker ([chunker@sfb.state.az.us](mailto:chunker@sfb.state.az.us)) Signed Letters of Intent will be Faxed to Contractor and Project Manager.*

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